

GENERAL INSTRUCTIONS

1. Prepare this report in conformity with the 1996 National Association of Regulatory Utility Commissioners Uniform System of Accounts for Water and/or Sewer Utilities.
2. Interpret all accounting words and phrases in accordance with the USOA.
3. Complete each question fully and accurately, even if it has been answered in a previous annual report. Enter the word "None" where it truly and completely states the fact.
4. For any question, section, or page which is not applicable to the respondent, enter the words "Not Applicable" or "NA". Do not omit any pages.
5. Where dates are called for, the month and day should be stated as well as the year.
6. Complete this report by means which result in a permanent record. This should be ink, typewriter or computer. Money items (except averages) throughout the report should be shown in units of dollars adjusted to accord with footings.
7. If there is not enough room on any schedule, an additional page or pages may be added provided the format of the added schedule matches the format of the schedule with not enough room. Such a schedule should reference the appropriate schedules, state the name of the utility, and state the year of the report.
8. The report should be filled out in duplicate and one copy returned by April 1st of the year following the date of the report. The report should be returned to:

Virginia State Corporation Commission
Division of Public Utility Accounting
Tyler Building Floor 4B
P. O. Box 1197
Richmond, Virginia 23218
804/371-9700

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CLASS "C"

WATER and/or SEWER UTILITY

ANNUAL REPORT
OF

Exact Legal Name of Respondent

FOR THE

YEAR ENDED

December 31,

REPORT OF

(Address)

(County)

For Year Ended December 31,

Date Utility First Organized _____

Telephone Number _____

Location where books and records are located: _____

Contacts:

Name	Title	Principal Business Address	Salary Charged Utility
Person to send correspondence:			
Person who prepared this report:			
Officers and Managers:			NOT
			REQUIRED

Report every corporation or person owning or holding directly or indirectly 5 percent or more of the voting securities of the reporting utility:

Name	Percent Ownership in Utility	Principal Business Address	Salary Charged Utility
			NOT
			REQUIRED

UTILITY NAME: _____

YEAR OF REPORT December 31,

INCOME STATEMENT

Account Name	Ref. Page No.	Water	Sewer	Other	Total Company
Gross Revenue:					
Residential		\$ _____	\$ _____	\$ _____	\$ _____
Commercial		_____	_____	_____	_____
Industrial		_____	_____	_____	_____
Multiple Family		_____	_____	_____	_____
Guaranteed Revenues		_____	_____	_____	_____
Other (Specify)		_____	_____	_____	_____
Total Gross Revenue		\$ _____	\$ _____	\$ _____	\$ _____
Operation Expense	W-3 S-3	_____	_____	_____	_____
Depreciation Expense	F-5	_____	_____	_____	_____
Amortization Expense		_____	_____	_____	_____
Taxes Other Than Income	F-7	_____	_____	_____	_____
Income Taxes	F-7	_____	_____	_____	_____
Total Operating Expense		\$ _____	\$ _____	\$ _____	\$ _____
Net Operating Income (Loss)		\$ _____	\$ _____	\$ _____	\$ _____
Other Income:					
Nonutility Income		_____	_____	_____	_____
_____		_____	_____	_____	_____
Other Deductions:					
Miscellaneous Nonutility Expenses		_____	_____	_____	_____
Interest Expense		_____	_____	_____	_____
_____		_____	_____	_____	_____
_____		_____	_____	_____	_____
Net Income (Loss)		\$ _____	\$ _____	\$ _____	\$ _____

UTILITY NAME: _____

YEAR OF REPORT December 31,

NET UTILITY PLANT

Plant Accounts (101 - 107) Inclusive	Water	Sewer	W & S Other Than Reporting Systems	Total
Utility Plant in Service (101)	\$ _____	\$ _____	\$ _____	\$ _____
Construction Work in Progress (105)	_____	_____	_____	_____
Other (Specify)	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Total Utility Plant	\$ _____	\$ _____	\$ _____	\$ _____

ACCUMULATED DEPRECIATION AND AMORTIZATION OF UTILITY PLANT

Account 108	Water	Sewer	W & S Other Than Reporting Systems	Total
Balance First of Year	\$ _____	\$ _____	\$ _____	\$ _____
Credits During Year:				
Accruals charged to depreciation account	_____	_____	_____	_____
Salvage	_____	_____	_____	_____
Other credits (Specify)	_____	_____	_____	_____
Total credits	\$ _____	\$ _____	\$ _____	\$ _____
Debits During Year:				
Book cost of plant retired	_____	_____	_____	_____
Cost of removal	_____	_____	_____	_____
Other debits (Specify)	_____	_____	_____	_____
Total debits	\$ _____	\$ _____	\$ _____	\$ _____
Balance End of Year	\$ _____	\$ _____	\$ _____	\$ _____

UTILITY NAME: _____

YEAR OF REPORT December 31,

CAPITAL STOCK (201-204)

	Common Stock	Preferred Stock
Par or stated value per share	\$ _____	\$ _____
Shares authorized	_____	_____
Shares issued and outstanding	_____	_____
Total par value of stock issued	\$ _____	\$ _____
Dividends declared per share for year	\$ _____	\$ _____

RETAINED EARNINGS (215)

	Appropriated	Un-Appropriated
Balance first of year	\$ _____	\$ _____
Changes during the year (specify):	_____	_____
Net Income/(Loss)	_____	_____
Balance end of year	\$ _____	\$ _____

PROPRIETARY CAPITAL (218)

	Proprietor Or Partner	Partner
Balance first of year	\$ _____	\$ _____
Changes during the year (specify):	_____	_____
Balance end of year	\$ _____	\$ _____

LONG TERM DEBT (224)

Description of Obligation (Including Nominal Date of Issue and Date of Maturity)	Interest		Principal Per Balance Sheet Date
	Rate	Payments	
	_____	_____	\$ _____
	_____	_____	_____
	_____	_____	_____
Total			\$ _____

UTILITY NAME: _____

YEAR OF REPORT December 31,

CONTRIBUTIONS IN AID OF CONSTRUCTION (271)

(a)	Water (b)	Sewer (c)	Total (d)
Balance first of year	\$ _____	\$ _____	\$ _____
Add credits during year	_____	_____	_____
Total	\$ _____	\$ _____	\$ _____
Deduct charges during year	_____	_____	_____
Balance end of year	\$ _____	\$ _____	\$ _____
Less Accumulated Amortization	_____	_____	_____
Net CIAC	\$ _____	\$ _____	\$ _____

ADDITIONS TO CONTRIBUTIONS IN AID OF CONSTRUCTION DURING YEAR (CREDITS)

Report below all developers or contractors agreements from which cash or property was received during the year.	Indicate "Cash" or "Property"	Water	Sewer
Subtotal		\$ _____	\$ _____
Report below all capacity charges, main extension charges and customer connection charges (tap fees) received during the year.			
Description of Charge	Number of Connections	Charge per Connection	
Total Credits During Year		\$ _____	\$ _____

UTILITY NAME: _____

YEAR OF REPORT December 31,

SCHEDULE OF YEAR END RATE BASE

Account No. (a)	Account Name (b)	Reference Page (c)	Water Utility (d)	Sewer Utility (e)
101-105	Utility Plant in Service	F-5	\$	\$
	Less:			
108	Accumulated Depreciation and Amortization	F-5		
271	CIAC	F-8		
	Subtotal		\$	\$
	Additions:			
272	Accumulated Amortization of Contributions in Aid of Construction	F-8		
	Subtotal		\$	\$
	Plus or Minus:			
114	Acquisition Adjustment (1)			
115	Accumulated Amortization of Acquisition Adjustment (1)			
	Cash Working Capital (2)			
	Other (Specify)			
	RATE BASE		\$	\$
	NET OPERATING INCOME	F-3	\$	\$
	ACHIEVED RATE OF RETURN (Net Operating Income/Rate Base)		%	%

Notes:

- (1) Include only those Acquisition Adjustments that have been approved by the Commission.
- (2) 1/9th of Total Operation & Maintenance Expense if Company bills in arrears.

UTILITY NAME: _____

YEAR OF REPORT December 31,

WATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
301	Organization	\$	\$	\$	\$
302	Franchises				
303	Land and Land Rights				
304	Structures and Improvements				
305	Collecting and Impounding Reservoirs				
306	Lake, River and Other Intakes				
307	Wells and Springs				
308	Infiltration Galleries and Tunnels				
309	Supply Mains				
310	Power Generation Equipment				
311	Pumping Equipment				
320	Water Treatment Equipment				
330	Distribution Reservoirs and Standpipes				
331	Transmission and Distribution Mains				
333	Services				
334	Meters and Meter Installations				
335	Hydrants				
339	Other Plant and Miscellaneous Equipment				
340	Office Furniture and Equipment				
341	Transportation Equipment				
342	Stores Equipment				
343	Tools, Shop and Garage Equipment				
344	Laboratory Equipment				
345	Power Operated Equipment				
346	Communication Equipment				
347	Miscellaneous Equipment				
348	Other Tangible Plant				
	Total Water Plant	\$	\$	\$	\$

UTILITY NAME: _____

YEAR OF REPORT December 31,

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WATER

Acct. No. (a)	Account Name (b)	Average Service Life In Years (c)	Average Salvage In Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)	Credits (h)	Accum. Depr. Balance End of Year (f-g+h=i) (i)
304	Structures and Improvements	_____	%	%	\$ _____	\$ _____	\$ _____	\$ _____
305	Collecting and Impounding Reservoirs	_____	_____	_____	_____	_____	_____	_____
306	Lake, River and Other Intakes	_____	_____	_____	_____	_____	_____	_____
307	Wells and Springs	_____	_____	_____	_____	_____	_____	_____
308	Infiltration Galleries and Tunnels	_____	_____	_____	_____	_____	_____	_____
309	Supply Mains	_____	_____	_____	_____	_____	_____	_____
310	Power Generation Equipment	_____	_____	_____	_____	_____	_____	_____
311	Pumping Equipment	_____	_____	_____	_____	_____	_____	_____
320	Water Treatment Equipment	_____	_____	_____	_____	_____	_____	_____
330	Distribution Reservoirs and Standpipes	_____	_____	_____	_____	_____	_____	_____
331	Transmission and Distribution Mains	_____	_____	_____	_____	_____	_____	_____
333	Services	_____	_____	_____	_____	_____	_____	_____
334	Meters and Meter Installations	_____	_____	_____	_____	_____	_____	_____
335	Hydrants	_____	_____	_____	_____	_____	_____	_____
339	Other Plant and Miscellaneous Equipment	_____	_____	_____	_____	_____	_____	_____
340	Office Furniture and Equipment	_____	_____	_____	_____	_____	_____	_____
341	Transportation Equipment	_____	_____	_____	_____	_____	_____	_____
342	Stores Equipment	_____	_____	_____	_____	_____	_____	_____
343	Tools, Shop and Garage Equipment	_____	_____	_____	_____	_____	_____	_____
344	Laboratory Equipment	_____	_____	_____	_____	_____	_____	_____
345	Power Operated Equipment	_____	_____	_____	_____	_____	_____	_____
346	Communication Equipment	_____	_____	_____	_____	_____	_____	_____
347	Miscellaneous Equipment	_____	_____	_____	_____	_____	_____	_____
348	Other Tangible Plant	_____	_____	_____	_____	_____	_____	_____
	Totals	_____	_____	_____	\$ _____	\$ _____	\$ _____	\$ _____

UTILITY NAME: _____

YEAR OF REPORT December 31,

WATER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
601	Salaries and Wages - Employees	\$ _____
603	Salaries and Wages - Officers, Directors and Majority Stockholders	_____
604	Employee Pensions and Benefits	_____
610	Purchased Water	_____
615	Purchased Power	_____
616	Fuel for Power Production	_____
618	Chemicals	_____
620	Materials and Supplies	_____
630	Contractual Services	_____
640	Rents	_____
650	Transportation Expense	_____
655	Insurance Expense	_____
665	Regulatory Commission Expenses	_____
670	Bad Debt Expense	_____
675	Miscellaneous Expenses	_____
	Total Water Operation and Maintenance Expense	\$ _____

WATER CUSTOMERS

Description	Number First of Year	Additions	Disconnects	Number End of Year
Metered Customers:				
5/8 X 3/4"	_____	_____	_____	_____
1"	_____	_____	_____	_____
1-1/2"	_____	_____	_____	_____
2"	_____	_____	_____	_____
2-1/2"	_____	_____	_____	_____
3"	_____	_____	_____	_____
Other (Specify):	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Unmetered Customers	_____	_____	_____	_____
Total Customers	=====	=====	=====	=====

UTILITY NAME: _____

YEAR OF REPORT December 31,

PUMPING AND PURCHASED WATER STATISTICS

(a)	WATER PURCHASED FOR RESALE (Omit 000's) (b)	WATER PUMPED FROM WELLS (Omit 000's) (c)	TOTAL WATER PURCHASED AND PUMPED (Omit 000's) [(b) + (c)] (d)	WATER SOLD TO CUSTOMERS (Omit 000's) (e)
January	_____	_____	_____	_____
February	_____	_____	_____	_____
March	_____	_____	_____	_____
April	_____	_____	_____	_____
May	_____	_____	_____	_____
June	_____	_____	_____	_____
July	_____	_____	_____	_____
August	_____	_____	_____	_____
September	_____	_____	_____	_____
October	_____	_____	_____	_____
November	_____	_____	_____	_____
December	_____	_____	_____	_____
Total for year	=====	=====	=====	=====

If water is purchased for resale, indicate the following:

Vendor _____

Point of delivery _____

If water is sold to other water utilities for redistribution, list names of such utilities below:

UTILITY NAME: _____

YEAR OF REPORT December 31,

WELLS AND WELL PUMPS

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Year Constructed	_____	_____	_____	_____	_____	_____	_____
Types of Well Construction and Casing	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
Depth of Wells	_____	_____	_____	_____	_____	_____	_____
Diameter of Wells	_____	_____	_____	_____	_____	_____	_____
Pump - GPM	_____	_____	_____	_____	_____	_____	_____
Motor - HP	_____	_____	_____	_____	_____	_____	_____
Yield of Wells in GPD	_____	_____	_____	_____	_____	_____	_____
Auxilliary Power	_____	_____	_____	_____	_____	_____	_____

RESERVOIRS

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Description (steel, concrete or pneumatic)	_____	_____	_____	_____	_____	_____	_____
Capacity of Tank	_____	_____	_____	_____	_____	_____	_____
Ground or Elevated	_____	_____	_____	_____	_____	_____	_____

HIGH SERVICE PUMPING

Motors (a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Manufacturer	_____	_____	_____	_____	_____	_____	_____
Type	_____	_____	_____	_____	_____	_____	_____
Rated Horsepower	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____
Pumps	_____	_____	_____	_____	_____	_____	_____
Manufacturer	_____	_____	_____	_____	_____	_____	_____
Type	_____	_____	_____	_____	_____	_____	_____
Capacity in GPM	_____	_____	_____	_____	_____	_____	_____
Average Number of Hours Operated Per Day	_____	_____	_____	_____	_____	_____	_____
Auxilliary Power	_____	_____	_____	_____	_____	_____	_____

UTILITY NAME: _____

YEAR OF REPORT December 31,

SOURCE OF SUPPLY

List for each source of supply:							
Gallons per day of source	_____	_____	_____	_____	_____	_____	_____
Type of Source	_____	_____	_____	_____	_____	_____	_____

WATER TREATMENT FACILITIES

List for each water treatment facility:							
Type	_____	_____	_____	_____	_____	_____	_____
Make	_____	_____	_____	_____	_____	_____	_____
Gallons per day capacity	_____	_____	_____	_____	_____	_____	_____
Method of Measurement	_____	_____	_____	_____	_____	_____	_____

OTHER WATER SYSTEM INFORMATION

Furnish information below for each system not physically connected with another facility. A separate page should be used where necessary.							
1. Present ERC's* now being served	_____	_____	_____	_____	_____	_____	_____
2. Present ERC's* that system can efficiently serve	_____	_____	_____	_____	_____	_____	_____
3. Estimated annual increase in ERC's*	_____	_____	_____	_____	_____	_____	_____
4. List fire fighting facilities and capacities	_____	_____	_____	_____	_____	_____	_____
5. List percent of certificated area where service connections are installed	_____	_____	_____	_____	_____	_____	_____
6. What is the current need for system upgrading and/or expansion?	_____	_____	_____	_____	_____	_____	_____
7. What are plans for future system upgrading and/or expansion?	_____	_____	_____	_____	_____	_____	_____
8. Have questions 6 and 7 been discussed with an engineer (if so, state name and address)	_____	_____	_____	_____	_____	_____	_____

* ERC = (Total Gallons Sold / 365 days) / 350 Gallons Per Day

UTILITY NAME: _____

YEAR OF REPORT December 31,

WASTEWATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	PREVIOUS YEAR (c)	ADDITIONS (d)	RETIREMENTS (e)	CURRENT YEAR (f)
351	Organization	\$	\$	\$	\$
352	Franchises				
353	Land and Land Rights				
354	Structures and Improvements				
360	Collection Sewers - Force				
361	Collection Sewers - Gravity				
362	Special Collecting Structures				
363	Services to Customers				
364	Flow Measuring Devices				
365	Flow Measuring Installations				
370	Receiving Wells				
371	Pumping Equipment				
380	Treatment and Disposal Equipment				
381	Plant Sewers				
382	Outfall Sewer Lines				
389	Other Plant and Miscellaneous Equipment				
390	Office Furniture and Equipment				
391	Transportation Equipment				
392	Stores Equipment				
393	Tools, Shop and Garage Equipment				
394	Laboratory Equipment				
395	Power Operated Equipment				
396	Communication Equipment				
397	Miscellaneous Equipment				
398	Other Tangible Plant				
	Total Sewer Plant	\$	\$	\$	\$

UTILITY NAME: _____

YEAR OF REPORT December 31,

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WASTEWATER

Acct. No. (a)	Account Name (b)	Average Service Life In Years (c)	Average Salvage In Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)	Credits (h)	Accum. Depr. Balance End of Year (f-g+h=i) (i)
354	Structures and Improvements	_____	%	%	\$ _____	\$ _____	\$ _____	\$ _____
360	Collection Sewers - Force	_____			_____	_____	_____	_____
361	Collection Sewers - Gravity	_____			_____	_____	_____	_____
362	Special Collecting Structures	_____			_____	_____	_____	_____
363	Services to Customers	_____			_____	_____	_____	_____
364	Flow Measuring Devices	_____			_____	_____	_____	_____
365	Flow Measuring Installations	_____			_____	_____	_____	_____
370	Receiving Wells	_____			_____	_____	_____	_____
371	Pumping Equipment	_____			_____	_____	_____	_____
380	Treatment and Disposal Equipment	_____			_____	_____	_____	_____
381	Plant Sewers	_____			_____	_____	_____	_____
382	Outfall Sewer Lines	_____			_____	_____	_____	_____
389	Other Plant and Miscellaneous Equipment	_____			_____	_____	_____	_____
390	Office Furniture and Equipment	_____			_____	_____	_____	_____
391	Transportation Equipment	_____			_____	_____	_____	_____
392	Stores Equipment	_____			_____	_____	_____	_____
393	Tools, Shop and Garage Equipment	_____			_____	_____	_____	_____
394	Laboratory Equipment	_____			_____	_____	_____	_____
395	Power Operated Equipment	_____			_____	_____	_____	_____
396	Communication Equipment	_____			_____	_____	_____	_____
397	Miscellaneous Equipment	_____			_____	_____	_____	_____
398	Other Tangible Plant	_____			_____	_____	_____	_____
	Total Sewer Plant				\$ _____	\$ _____	\$ _____	\$ _____

UTILITY NAME: _____

YEAR OF REPORT December 31,

SEWER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
701	Salaries and Wages - Employees	\$ _____
703	Salaries and Wages - Officers, Directors and Majority Stockholders	_____
704	Employee Pensions and Benefits	_____
710	Purchased Sewage Treatment	_____
711	Sludge Removal Expense	_____
715	Purchased Power	_____
716	Fuel for Power Production	_____
718	Chemicals	_____
720	Materials and Supplies	_____
730	Contractual Services	_____
740	Rents	_____
750	Transportation Expense	_____
755	Insurance Expense	_____
765	Regulatory Commission Expenses	_____
770	Bad Debt Expense	_____
775	Miscellaneous Expenses	_____
	Total Sewer Operation and Maintenance Expense	\$ _____

SEWER CUSTOMERS

Description	Number First of Year	Additions	Disconnects	Number End of Year
Metered Customers:				
Customers By Water Meter Size:				
5/8 X 3/4"				
1"				
1-1/2"				
2"				
2-1/2"				
3"				
Other (Specify):				
Unmetered Customers				
Total Customers	=====	=====	=====	=====

UTILITY NAME: _____

YEAR OF REPORT December 31,

PUMPING EQUIPMENT

Lift station number	_____	_____	_____	_____	_____
Make or type and nameplate data of pump	_____	_____	_____	_____	_____
Year installed	_____	_____	_____	_____	_____
Rated capacity	_____	_____	_____	_____	_____
Size	_____	_____	_____	_____	_____
Power:					
Electric	_____	_____	_____	_____	_____
Mechanical	_____	_____	_____	_____	_____
Nameplate data of motor _____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

SERVICE CONNECTIONS

Size (Inches)	_____	_____	_____	_____	_____
Type (PVC, VCP, etc.)	_____	_____	_____	_____	_____
Average length	_____	_____	_____	_____	_____
Number of active service connections	_____	_____	_____	_____	_____
Beginning of year	_____	_____	_____	_____	_____
Added during year	_____	_____	_____	_____	_____
Retired during year	_____	_____	_____	_____	_____
End of year	_____	_____	_____	_____	_____
Give full particulars concerning inactive connections	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

COLLECTING AND FORCE MAINS AND MANHOLES

	Collecting Mains			Force Mains		
Size (Inches)	_____	_____	_____	_____	_____	_____
Type of main	_____	_____	_____	_____	_____	_____
Length of main (nearest foot):	_____	_____	_____	_____	_____	_____
Beginning of year	_____	_____	_____	_____	_____	_____
Added during year	_____	_____	_____	_____	_____	_____
Retired during year	_____	_____	_____	_____	_____	_____
End of year	_____	_____	_____	_____	_____	_____
Manholes						
Size	_____	_____	_____	_____	_____	_____
Type	_____	_____	_____	_____	_____	_____
Number:						
Beginning of year	_____	_____	_____	_____	_____	_____
Added during year	_____	_____	_____	_____	_____	_____
Retired during year	_____	_____	_____	_____	_____	_____
End of year	_____	_____	_____	_____	_____	_____

UTILITY NAME: _____

YEAR OF REPORT December 31,

TREATMENT PLANT

Manufacturer	_____	_____	_____
Type	_____	_____	_____
"Steel" or "Concrete"	_____	_____	_____
Total Capacity	_____	_____	_____
Average Daily Flow	_____	_____	_____
Effluent Disposal	_____	_____	_____
Total Gallons of Sewage Treated	_____	_____	_____

MASTER LIFT STATION PUMPS

Manufacturer	_____	_____	_____	_____	_____	_____
Capacity	_____	_____	_____	_____	_____	_____
Motor: Manufacturer	_____	_____	_____	_____	_____	_____
Horsepower	_____	_____	_____	_____	_____	_____
Power (Electric or Mechanical)	_____	_____	_____	_____	_____	_____

OTHER SEWER SYSTEM INFORMATION

1. Present number of ERC's* being served _____ 2. Maximum number of ERC's* which can be served _____ 3. Estimated annual increase in ERC's* _____ 4. State any plans and estimated completion dates for any enlargements of this system _____ _____ _____
5. If present systems do not meet present environmental requirements, submit the following: a. Evaluation of the present plant or plants in regard to meeting the requirements. b. Plans for funding and construction of the required upgrading. c. When will construction begin? _____
6. In what percent of your certificated area have service connections been installed? _____ %
<p style="text-align: center;">* ERC = (Total Gallons Treated / 365 days) / 275 Gallons Per Day</p> <p style="text-align: center;">Note: Total Gallons Treated includes both sewage treated and purchased sewage treatment.</p>

CERTIFICATION

State of _____

County of _____

_____ makes oath and says that
(Name of affiant)

he/she is _____
(Official title of affiant)

of _____ ;
(Exact legal title or name of respondent)

that he/she has examined the foregoing report; that to the best of his/her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business affairs of the above named respondent in respect to each and every matter set forth therein during the period from and including January 1, xxxx, to and including December 31, xxxx.

(Signature of affiant)

Subscribed and sworn to before me, a _____
in and for the State and County named, this _____ day of

My commission expires _____

(Signature of oath administer)